							1				FILING DAT	D		
		MULT	IPLE DEP	DEPENDENT CLAIM CULATION SHEET			APPLICANT	APPLICANT(S)				1		
		FEE	CALCUL	ATION S	HEE I		}							
							CLAIMS	F		F				
	A3 F	NED "	AFTER 18T	T	 	AMEHOMENT			1	<u> </u>	1	A10	Ι_	
	■ND /	DEP	NID	DEP	₽ND	DEP	51	IND	DEP .	IND .	DEP	ND 1	-	
1	/		 	 	}	 	52				 	'	_	
2			 		 	+	53						Ī	
3			 	 		1	54							
5	- (- (-		55							
6	-		1				56							
7	/		1				57						_	
8							58		<u> </u>		ļ		_	
9	\sum_{i}				!		59				}		-	
10		-	<u> </u>	ļ	 		60				ļi		-	
11			<u> </u>	<u> </u>	 	 	61				 	1	 	
12	-/		 		 	1	62				 		 	
13	-\		 	 	 -		64							
14	/-			 	 	1	65							
15 16	/		 		l	1	66							
17	>		 		<u> </u>		67						_	
18							68						<u> </u>	
19	7 -					2	69						-	
20	K					J	70		· ·				<u> </u>	
21	1 1/4		1				71	<u> </u>					Ι-	
22		1	 	-	ļ	ļ	72							
23		1	}	ļ	ļ		74				1		Γ	
24						 	75′							
25 26		+					76							
27		1					. 77						_	
28							78						-	
29		7		<u> </u>	<u> </u>		79				-		-	
30			 		} -	 	80						一	
31			ļ	<u> </u>			81 82							
32	,	1	<u> </u>	 	 	+	83							
33 34	1 1		 	 	 	+	84							
35		 	l	·			85						<u> </u> _	
36		1					86						-	
37							87						-	
38		1			 		88	<u>-</u>		 			-	
39		1	{	 	ļ	 	89		 	 			-	
40	i		 	-	 		90				1	<u> </u>		
41		+		1	-	+	92	 						
42		 	 	 	 	+	93							
43		 	1	 		1	94						L	
44		1	1	1			95			 			<u> </u>	
46							96			 	 	ļ	-	
47			1				97	 		 			-	
48					 	-	98	 	 	 	 		\vdash	
49			ļ			 	99	ļ		 			-	
50			 	 	<u> </u>	 	100		 	ļ	 		1	
AL IND.		1]] [L] [TOTAL IND.] [<u> </u>] [j	
AL DEP.				 +	-	لسه	TOTAL DEP.		7				1888	
AL MS	#	2,00	 			3.33	CLAMS	l	1000	l		T of COI		